Instructions for City of Menasha Police Department Records Division Inspection Requests –

- Print this form out on your computer. The printed form must be legible and in its original format.
- This form needs to be filled in completely.
- If you have any questions regarding this form, contact our Records Division between the hours of 7am-2pm, Monday through Friday at (920) 967-3597.
- The completed form can either be emailed, faxed, dropped off or mailed to:

The City of Menasha Police Department Records Division 430 First St. Menasha, WI 54952

Faxed to: (920) 967-5145

Emailed to: jgroesch@ci.menasha.wi.us

DATE OF REQUEST	RECORDS DIVISION – INSPECTION REQUEST

Apart from certain statutory exceptions, it is the policy of the Menasha Police Department <u>not</u> to allow inspection of or release copies of juvenile records. WI STATE STATUTE 48.396(1), 938.396(1)

Please fill out this form if you are requesting a search of Department records. All records shall be processed as soon as practical and without delay.

I would like my request:
PHOTOCOPIED
EMAILED. color \$.13 per page No cost
Please be specific as to exactly what you want photocopied. List specific incident and the date it occurred.
Our NameAddress
City Phone
Email
eason for Search
ecord Name to Search DOB (if known)
nclaimed record requests will be forwarded to the City Treasurer for collection.
PPROVED RECORD RELEASED DATE ENIED REASON
LTERNATIVE: Your records request has been denied by the Menasha Police Department. If you abmitted a written request, then you may bring an action for mandamus petitioning the court to der disclosure. WI STATE STATUTE 19.37(1)(a) and (b)

Questions regarding request: Call the Records Clerk or Investigative Lt. (Mon-Fri, 7AM – 2PM)

Records Division Inspection Request